together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Complete and send this form.

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form sould be used for gansmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below of the patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. maintenance fee notifications.

FIRST NAMED INVENTOR

Mika Kosonen

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

FILING DATE

12/03/2001

4955

APPLICATION NO.

10/006,921

7590

01/12/2007

WARE FRESSOLA VAN DER SLUYS & ADOLPHSON, LLP **BRADFORD GREEN, BUILDING 5** 755 MAIN STREET, P O BOX 224 MONROE, CT 06468

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USP 20,371) 273-2885, on the date indicated below.

Lissette Manos _	(Depositor's name)
NHIII W.	 (Signature)
March 30, 2007	(Date)

CONFIRMATION NO.

9285

ATTORNEY DOCKET NO.

915.403

APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1400 \$300 \$0 \$1700 04/12/2007 EXAMINER ART UNIT CLASS-SUBCLASS ELALLAM, AHMED 2616 370-535000 91 FC+1581 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE 04/02/2007 TBESHAH2 0000066 10006921 2 For printing on the patent fronge age, 15504 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	TITLE OF INVENTION	I: MULTIPLEXING AN	D DEMULTIPLEXING	METHOD AND APPARA	TUS		
EXAMINER ART UNIT CLASS-SUBCLASS ELALLAM, AHMED 2616 370-535000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer EXAMINER ART UNIT CLASS-SUBCLASS 04/02/2007 TBESHAH2 0000066 10006921 2. For printing on the patent frongpage 15504 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered attorneys or agents. If no name is 3	APPLN. TYPE .	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
ELALLAM, AHMED 2616 370-535000 91 FC:1591 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer ELALLAM, AHMED 2616 370-535000 91 FC:1591 2. For printing on the patent frongeage 15304 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3	nonprovisional	NO	\$1400	\$300	\$0	\$1700	04/12/2007
ELALLAM, AHMED 2616 370-535000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer ELALLAM, AHMED 2616 370-535000 21 FC: 1581 2. For printing on the patent fronge age; 1594 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is	EXAM	IINER	ART UNIT	CLASS-SUBCLASS	04/02/2007 TE	DECUAND BROBBET 45	001004
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer 1. Change of correspondence address or indication of "Fee Address" (37 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3	ELALLAN	1, AHMED	2616	370-535000	91 FC+1591		
	CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer			2. For printing on the patent frong asc. 1554 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is			re 3012) Sluys & Adolphs

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Nokia Corporation

Advance Order - # of Copies

Keilalahdentie 4

FIN-02150 Espoo, Finland

Please check the appropriate assignee category or categories (will not be printed on the patent): \square Individual \square Corporation or other private group entity \square Government

4a. The following fee(s) are submitted: Issue Fee

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

A check is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 23-0442 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

Publication Fee (No small entity discount permitted)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

DEFICIENCIES ONLY □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

March 30, 2007

58,051

Keith R. Obert Typed or printed name Registration No.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

BEST AVAILABLE COPY